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MM 2-17-06

** CONTINUING DATA ****

This application is a DIV of 09/967,603 09/28/2001 PAT 6,723,077

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** FOREIGN APPLICATIONS ****

none MM 2-17-06

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/10/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	MM 2-17-06 SHEETS DRAWING 5	MM 2-17-06 TOTAL CLAIMS 81	MM 2-17-06 INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Signature	Initials				

ADDRESS

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TITLE

Cutaneous administration system

FILING FEE RECEIVED 1954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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